



Lincoln Police Department
James Peschong, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

July 8, 2013

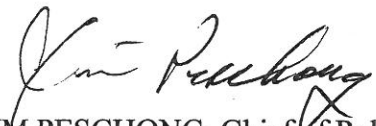
Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Vega, 300 Canopy Street requesting a class E, Entertainment District liquor license be added to the requested class C license.

The manager remains the same as the requested class C license.

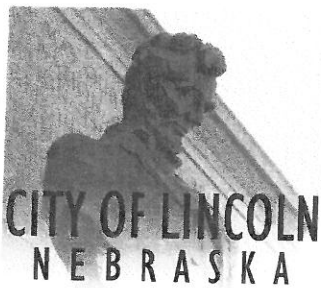
If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.


JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency





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MAYOR CHRIS BEUTLER

lincoln.ne.gov

July 2, 2013

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of Vega, 300 Canopy Street requesting a class C liquor license.

Carrie Mardock has requested that she be approved as the manager of the liquor license.

Background information on the applicant is as follows:

Carrie Mardock was born in Hastings, Nebraska. She graduated from the University of Nebraska in 2007.

Carrie Mardock employment history is as follows:

2010 - Present	Manager, Jimmick Studios	Lincoln, NE.
2004 - Present	Coordinator, Arts Incorporated	Lincoln, NE.
2009 - Present	Lincoln Musicians Associates	Lincoln, NE.

The required training was completed on 5-9-2013.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.


JIM PESCHONG, Chief of Police



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PROVIDE INFORMATION

Trade Name (doing business as) Vega

RECEIVED

Street Address #1 300 Canopy Street, Suite 220

JUN 17 2013

Street Address #2 _____

City Lincoln

County Lancaster

NEBRASKA LIQUOR
CONTROL COMMISSION

Premise Telephone number 402-525-4728

E-mail cm@vegalincoln.com

Is this location inside the city/village corporate limits:



YES



NO

Mailing address (where you want to receive mail from the Commission)

Name Carrie Mardock

Street Address #1 6238 Sunrise Road

Street Address #2 _____

City Lincoln

State NE

Zip Code 68510

DESIGNATE PROPERTY AND DIAGRAM OR DRAW THE STRUCTURE TO BE LICENSED
AND LICENSED THEREIN

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

**For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms

Length 81 feet

Width 46 feet

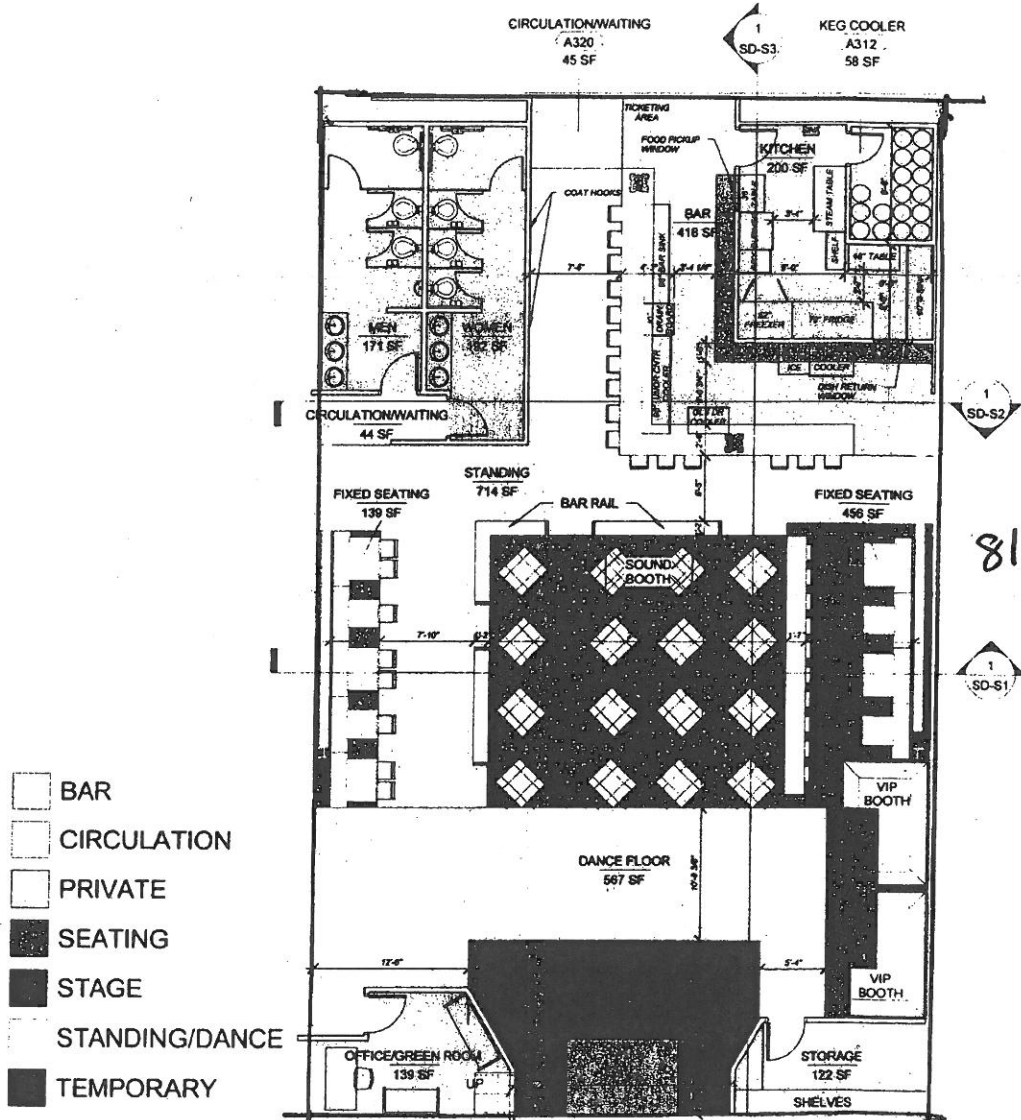
Is there a basement? Yes ☐ No ☒

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET

see attached floor plan, page 58 in business plan

Occupancy Calculations

Standing Area	5 SF/person	142	
Dance Floor	5 SF/person	114	
Flexible Seating	15 SF/person	36	106 (5 SF/person for tables removed)
Fixed Seating	7 SF/person	85	
Bar	# of seats	16	
Occupancy as shown:		393	
		463	Maximum Occupancy



- ☐ BAR
- ☐ CIRCULATION
- ☐ PRIVATE
- ☒ SEATING
- ☒ STAGE
- ☐ STANDING/DANCE
- ☒ TEMPORARY



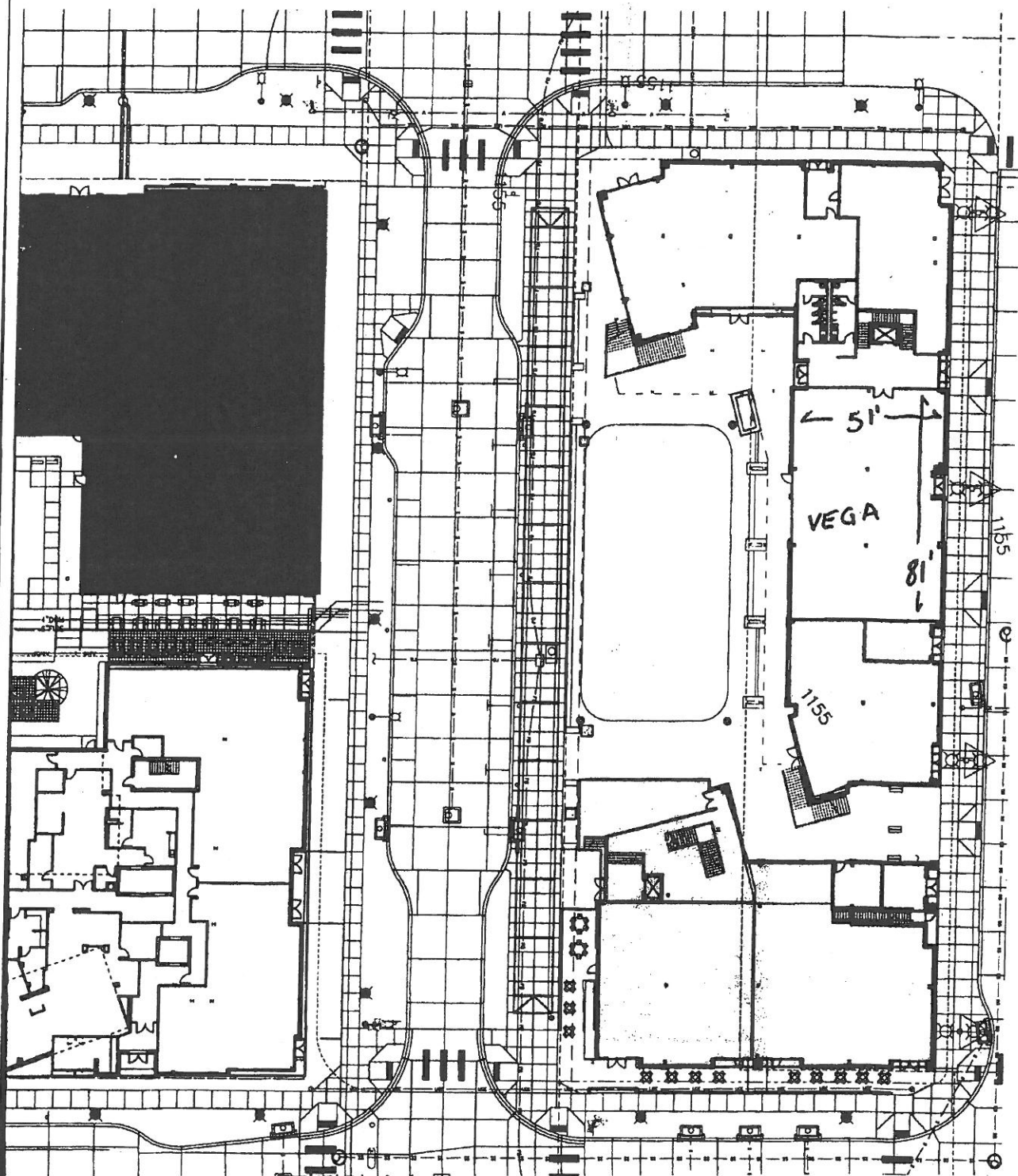
1 FLOOR PLAN
1/8" = 1'-0"



ENCOMPASS
ARCHITECTS PC
1200 D Street, Suite 100
Lincoln, NE 68508
Phone: 402.441.1111
Fax: 402.441.1112

VEGA
Astra Vega, LLC
Enter address here
EA Project No. 13-1000
Issue Date: 03/05/13

PLAN



APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ YES ☐ NO

If yes, please explain below or attach a separate page.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Jeremy Buckley	10/2007	Lincoln, NE	Driving under the influence / .08	First offense, fined \$500
Jeremy Buckley	2/2008	Lincoln, NE	Drinking while on duty	Fined \$100

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NEBRASKA LIQUOR

CONTROL COMMISSION

2. Are you buying the business of a current retail liquor license?

☐ YES ☒ NO

If yes, give name of business and liquor license number _____

- Submit a copy of the sales agreement
- Include a list of alcohol being purchased, list the name brand, container size and how many
- Submit a list of the furniture, fixtures and equipment

3. Was this premise licensed as liquor licensed business within the last two (2) years?

☐ YES ☒ NO

If yes, give name and license number _____

4. Are you filing a temporary operating permit to operate during the application process?

☐ YES ☒ NO

If yes:

- Attach temporary operating permit (T.O.P.) (form 125)
- T.O.P. will only be accepted at a location that currently holds a valid liquor license.

5. Are you borrowing any money from any source, include family or friends, to establish and/or operate the business?

☒ YES ☐ NO

If yes, list the lender(s) First National Bank of Omaha

APPLICATION FOR LIQUOR LICENSE
LIMITED LIABILITY COMPANY (LLC)
INSERT - FORM 3b

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

Office Use

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NEBRASKA LIQUOR
CONTROL COMMISSION

All members including spouse(s), are required to adhere to the following requirements:

- 1) All members spouse(s) must be listed
- 2) Managing/Contact member and all members holding over 25% interest and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
- 3) Managing/Contact member and all members holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License form 100 (even if a spousal affidavit has been submitted)

Attach copy of Articles of Organization (Articles must show barcode receipt by Secretary of States office)

Name of Registered Agent: CARRIE MAPDOCK

Name of Limited Liability Company that will hold license is listed on the Articles of Organization

ASTRA VEGA, LLC

LLC Address: 300 CANOPY ST #220

City: LINCOLN State: NE Zip Code: 68508

LLC Phone Number: 402.525.4728 LLC Fax Number: _____

Name of Managing/Contact Member

Name and information of contact member must be listed on following page

Last Name: ~~GARRE~~ MAPDOCK First Name: CARRIE MI: D

Home Address: ~~6008~~ 6238 SUNRISE RD City: LINCOLN

State: NE Zip Code: 68510 Home Phone Number: 402-525-4728

Carrie Mapdock

Signature of Managing/Contact Member

ACKNOWLEDGEMENT

State of Nebraska

County of LANCASTER

06/17/2013

Date

The foregoing instrument was acknowledged before me this

by Carrie Mapdock

name of person acknowledge

Affix Seal



GENERAL NOTARY - State of Nebraska
CLIFFORD H. KREIZEL III
My Comm. Exp. July 13, 2015

List names of all members and their spouses (even if a spousal affidavit has been submitted)

Last Name: Mardock First Name: Eli MI: T
Social Security Number: _____ Date of Birth: _____
Spouse Full Name (indicate N/A if single): Carrie Diane Mardock
Spouse Social Security Number: _____ Date of Birth: _____
Percentage of member ownership 25%

Last Name: Mardock First Name: Carrie MI: D
Social Security Number: _____ Date of Birth: _____
Spouse Full Name (indicate N/A if single): Eli Todd Mardock
Spouse Social Security Number: _____ Date of Birth: _____
Percentage of member ownership 25%

Last Name: WARDLAW First Name: JEREMY MI: W
Social Security Number: _____ Date of Birth: _____
Spouse Full Name (indicate N/A if single): _____
Spouse Social Security Number: _____ Date of Birth: JUN 17 2013
Percentage of member ownership 25%

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NEBRASKA LIQUOR
CONTROL COMMISSION

Last Name: Buckley First Name: Jeremy MI: W
Social Security Number: _____ Date of Birth: _____
Spouse Full Name (indicate N/A if single): N/A
Spouse Social Security Number: _____ Date of Birth: _____
Percentage of member ownership 25%

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Manager's information must be completed below. PLEASE PRINT CLEARLY.

JUN 17 2013

Gender: ☐ MALE ☒ FEMALE

NEBRASKA LIQUOR

Last Name: Mardock First Name: CAROL CONTROL COMMISSIONHome Address (include PO Box if applicable): 6238 Sunrise RoadCity: Lincoln County: Lancaster Zip Code: 68510Home Phone Number: 402-525-4728 Business Phone Number: 402-525-4728

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Hastings, NE

Are you married? If yes, complete spouse's information below. If no, skip this section and go to the next section.

☒ YES☐ NO

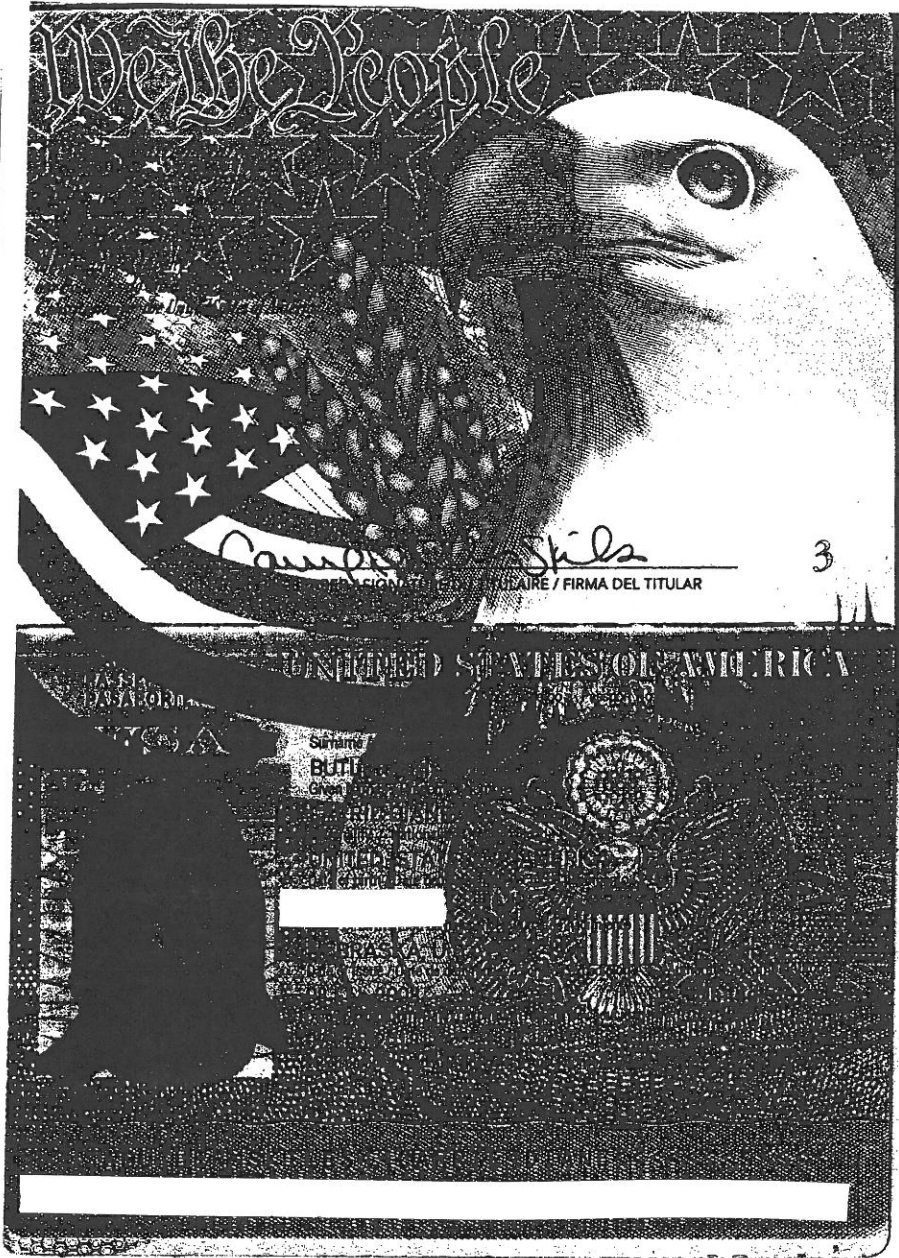
Spouse's information

Spouses Last Name: Mardock First Name: Eli MI: TSocial Security Number: _____ Drivers License Number & State: _____ NEDate Of Birth: _____ Place Of Birth: Omaha, NE

APPLICANT & SPOUSE MUST LIST RESIDENCES FOR THE LAST FIVE YEARS. THIS SECTION IS REQUIRED FOR ALL APPLICANTS.

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, NE	1982	2013	Lincoln, NE	1999	2006
Lincoln, NE	1999		Somerville, MA	2006	2009
			Seattle, WA	2009	2010

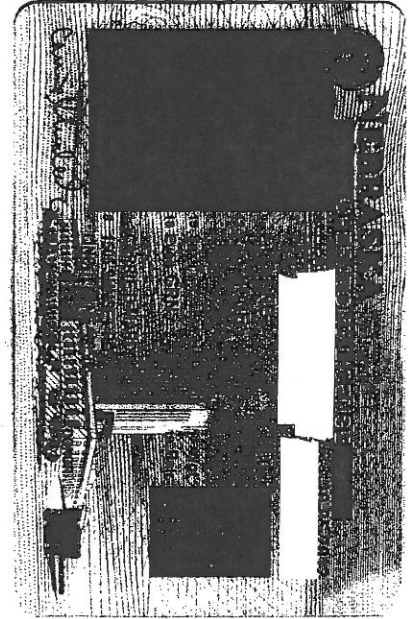
Lincoln, NE 2010 2013



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JUN 17 2013

NEBRASKA LIQUOR
CONTROL COMMISSION



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JUN 17 2013

NEBRASKA LIQUOR
CONTROL COMMISSION

STATE OF NEVADA
MARRIAGE CERTIFICATE
No. 2011061000034270

Inst #: 201106140000976

Fees: \$10.00

06/14/2011 11:21:24 AM

Receipt #: 810802

Requestor:

RECORDER CLARK COUNTY

Recorded By: RNS Pgs: 1

DEBBIE CONWAY

CLARK COUNTY RECORDER

STATE OF NEVADA

COUNTY OF CLARK

ASANO K. TAYLOR

DEPUTY MARRIAGE COMMISSIONER

This is to certify that the undersigned,

(print name and title of official performing marriage)

did on the 11TH day of the month of JUNE of the year 20 11

at 369 SOUTH THIRD STREET LAS VEGAS Nevada
(address of church) (city)

join in lawful wedlock ELI T MARDOCK
(groom)
of LINCOLN State/Country of NEBRASKA
(city)

date of birth

and CARRIE DIANE BUTLER
(bride)
of LINCOLN State/Country of NEBRASKA
(city)

date of birth

with their mutual consent, in the presence of SARAH BUTLER
(witness)

Signature of Official Performing Marriage (Black Ink Only)

ASANO K. TAYLOR
DEPUTY COMMISSIONER OF CIVIL MARRIAGES

Print Name and Title of Official

309 SOUTH THIRD STREET

Address of Official Performing Marriage

LAS VEGAS, NEVADA 89101

City, State and Zip Code



Diana Alba
DIANA ALBA, COUNTY CLERK

Bride/Groom Mailing Address: 2424 SOUTH 12ND STREET
LINCOLN, NE 68502

This Certificate must be typewritten or printed in black ink and presented within 10 days to the
Clark County Recorder, 500 S. Grand Central Parkway, Las Vegas, Nevada 89133-1510.

Patent #5,036,874

This copy is not valid unless prepared on "SafeImage"
paper, impressed with the raised seal of the Clark County Recorder.

TouchSafe®

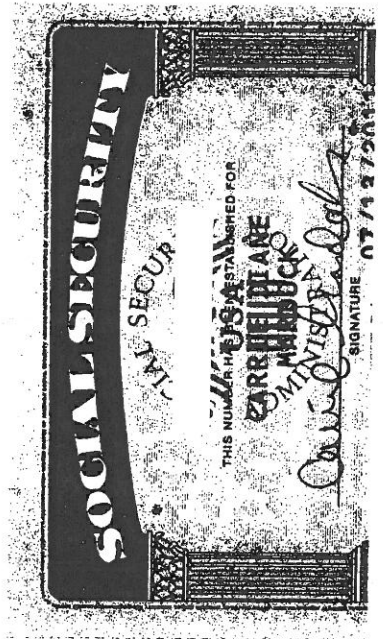
KEEP DOCUMENT IN A SAFE PLACE



Keep this stub with your personal records. The other side contains important information.

Please note: The date we issued this card is shown below the signature line.

**Keep your card in a safe place to prevent loss or theft.
DO NOT CARRY THIS CARD WITH YOU.
Do not laminate.**



CARRIE DIANE MARDOCK
2424 SOUTH 22ND STREET
LINCOLN NE 68502-3812